EXTENDED TO NOVEMBER

	DATE DED TO	140 A DIJDDIK	10, 201	,
	Organization	Dusinss	1	Tax Datum
Exembl	Organization	Dusiness	income	Tax Return
	/a		- CO22(-))	

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Department of the Treasury Internal Revenue Service
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v/Form990T for instructions and the latest information

Department of the Treasury Internal Revenue Service	•	Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3))	Open to Public Inspection for 501(c)(3) Organizations Only
Check box if address changed		Name of organization ((Em	ployer identification number ployees' trust, see ructions)
Exempt under section	Print	FAMILY FOUNDATION, INC.	{{1}}	<u>38-03627</u> 67
X 501(c)(3)	or Type	Number, street, and room or suite no. If a P.O. box, see instructions		elated business activity code instructions)
408(e) 220(e)		P.O. BOX 4964	┥	
408A530(a) 529(a)		City or town, state or province, country, and ZIP or foreign postal code KETCHUM, ID 83340	900	0099
Book value of all assets at end of year		F Group exemption number (See instructions)		
$\frac{1}{2}$, 533, 1	39.	G Check organization type ► X 501(c) corporation 501(c) trust 401(a) trust	Other trust
I Enter the number of the	าเกลกเรล	tion's unrelated trades or husinesses 1 Describe the only (or first) us	orolato	

Enter the number of the org	janization's unrelated tra	ides or	Dusinesses.	Τ	Describe the only (or first) unrelated
trade or business here	INVESTMENT	IN	INVESTMENT	FUNDS	If only one, complete Parts I-V If more than one,
describe the first in the blan	ik space at the end of the	previo	ous sentence, complete F	arts I and II, o	complete a Schedule M for each additional trade or
business, then complete Pa	ırts III-V.				

1 During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? If "Ves." enter the name and identifying number of the parent corporation.

If "Yes," enter the name and identifying number of the parent corporation.								
e books are in care of ▶ EDWARD F O'GARA III		Telephon	e number ▶ 208-	309-0361				
rt I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net				
Gross receipts or sales								
Less returns and allowances	1c							
Cost of goods sold (Schedule A, line 7)	2							
Gross profit. Subtract line 2 from line 1c	3							
Capital gain net income (attach Schedule D)	4a	14,416.		14,416.				
Net gain (loss) (Form 4797, Part II, line 17) (attach Form, 7, 5, 7	4b							
Capital loss deduction for trusts	4c							
Income (loss) from a partnership or an S corporation (attach statement)	5	3,724.	STMT 10	3,724.				
Rent income (Schedule C)	6							
Unrelated debt-financed income (Schedule E)	7							
Interest, annuities, royalties, and rents from a controlled organization (Schedule F)	8							
Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	9							
Exploited exempt activity income (Schedule I)	10							
Advertising income (Schedule J)	11							
Other income (See instructions, attach schedule)	12							
Total. Combine lines 3 through 12	13	18,140.		18,140.				
	The books are in care of EDWARD F O'GARA III Int I Unrelated Trade or Business Income Gross receipts or sales Less returns and allowances Cost of goods sold (Schedule A, line 7) Gross profit. Subtract line 2 from line 1c Capital gain net income (attach Schedule D) Net gain (loss) (Form 4797, Part II, line 17) (attach Forn, 7, 3, 7) Capital loss deduction for trusts Income (loss) from a partnership or an S corporation (attach statement) Rent income (Schedule C) Unrelated debt-financed income (Schedule E) Interest, annuities, royalties, and rents from a controlled organization (Schedule F) Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) Exploited exempt activity income (Schedule I) Advertising income (Schedule J) Other income (See instructions, attach schedule)	The books are in care of FDWARD F O'GARA III Int I Unrelated Trade or Business Income Gross receipts or sales Less returns and allowances Cost of goods sold (Schedule A, line 7) Gross profit. Subtract line 2 from line 1c Capital gain net income (attach Schedule D) Net gain (loss) (Form 4797, Part II, line 17) (attach Forn 7, 7, 4b Capital loss deduction for trusts Income (loss) from a partnership or an S corporation (attach statement) Rent income (Schedule C) Unrelated debt-financed income (Schedule E) Interest, annuities, royalties, and rents from a controlled organization (Schedule F) Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) Exploited exempt activity income (Schedule I) Advertising income (Schedule J) Other income (See instructions, attach schedule) Total. Combine lines 3 through 12	Telephone books are in care of EDWARD F O'GARA III Telephone Gross receipts or sales Less returns and allowances Cost of goods sold (Schedule A, line 7) Gross profit. Subtract line 2 from line 1c Capital gain net income (attach Schedule D) Net gain (loss) (Form 4797, Part II, line 17) (attach Formarian), Capital loss deduction for trusts Income (loss) from a partnership or an S corporation (attach statement) Rent income (Schedule C) Unrelated debt-financed income (Schedule E) Interest, annuities, royalties, and rents from a controlled organization (Schedule F) Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) Exploited exempt activity income (Schedule I) Advertising income (Schedule J) Other income (See instructions, attach schedule) Total. Combine lines 3 through 12	Telephone number 208- Intil Unrelated Trade or Business Income Gross receipts or sales Less returns and allowances Cost of goods sold (Schedule A, Ine 7) Gross profit. Subtract line 2 from line 1c Capital gain net income (attach Schedule D) Net gain (loss) (Form 4797, Part II, line 17) (attach Forn. 7, 4b Capital loss deduction for trusts Income (loss) from a partnership or an S corporation (attach statement) Rent income (Schedule C) Unrelated debt-financed income (Schedule E) Interest, annuities, royalties, and rents from a controlled organization (Schedule G) Exploited exempt activity income (Schedule I) Other income (See instructions, attach schedule) Total. Combine lines 3 through 12 Telephone number 208- (A) Income (B) Expenses (A) Income (B) Expenses (A) Income (B) Expenses (A) Income (B) Expenses				

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions)

(Except for contributions, deductions must be directly connected with the unrelated business income)

14	Compensation of officers, directors, and trustees (Schedule K)
15	Salaries and wages

Repairs and maintenance 16

17 Bad debts

18 Interest (attach schedule) (see instructions)

Taxes and licenses

Charitable contributions (See instructions for limitation rules)

Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13

Charitable contributions (See instructions for limitation rules)
Depreciation (attach Form 4562)
Less depreciation claimed on Schedule A and elsewhere on return
Depletion
Contributions to deferred compensation plans
Employee benefit programs
Excess exempt expenses (Schedule I)
Excess readership costs (Schedule I)
Other deductions (attach schedule)
Total deductions Add lines 14 through 28
Unrelated business taxable income before net operating loss deduction. Su
Deduction for net operating loss arising in tax years beginning on or after J
Unrelated business taxable income Subtract line 31 from line 30
B23701 01-09-19 LHA For Paperwork Reduction Act Notice, see instructions Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)

19 OGDEN, UT 20 21 22a 22b 23 24 25 26 27 28 0. 29 18,140 30 31

OCT 1 5 2019

14 15

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Form **990-T** (2018)

18,140.

Form 990-T (2018) FAMILY FOUNDATION, INC.

Part II	Total Unrelated Business Taxable Income				
	Total of unrelated business taxable income computed from all unrelated trades or businesses	(see ınstru	ctions)	33	18,140.
34	Amounts paid for disallowed fringes			34	
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see in	structions)		35	-
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the	e sum of			
	lines 33 and 34			36	<u> 18,140.</u>
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)			37	1,000.
	Unrelated business taxable income Subtract line 37 from line 36. If line 37 is greater than line	ne 36,			_
	enter the smaller of zero or line 36			38	<u>17,140.</u>
Part N					
	Organizations Taxable as Corporations Multiply line 38 by 21% (0 21)		•	39	3,599.
40	Trusts Taxable at Trust Rates See instructions for tax computation. Income tax on the amou	int on line 3	38 from		
	Tax rate schedule or Schedule D (Form 1041)		•	40	
	Proxy tax See instructions	, •	41		
	Alternative minimum tax (trusts only)			42	
	Tax on Noncompliant Facility Income See instructions			43	3,599.
Part V	Total Add lines 41, 42, and 43 to line 39 or 40, whichever applies Tax and Payments	····	······································	44	3,333.
	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116)	45a			
	Other credits (see instructions)	45b			
	General business credit. Attach Form 3800	45c			
	Credit for prior year minimum tax (attach Form 8801 or 8827)	45d			
	Total credits Add lines 45a through 45d			45e	
	Subtract line 45e from line 44			46	3,599.
47	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form	8866	Other (attach schedule)	47	
48	Total tax Add lines 46 and 47 (see instructions)			48	3,599.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2			49	0.
50 a	Payments: A 2017 overpayment credited to 2018	50a	•		
b	2018 estimated tax payments	50b	5,600		
C	Tax deposited with Form 8868	50c	Ť		
	Foreign organizations. Tax paid or withheld at source (see instructions)	50d			
	Backup withholding (see instructions)	50e			
	Credit for small employer health insurance premiums (attach Form 8941)	50f			
g	Other credits, adjustments, and payments: Form 2439				
	Form 4136 Other Total >	► 50g			F (00
51	Total payments. Add lines 50a through 50g			51	5,600. 24.
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed		_	52	
53 54	Overpayment If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid			53 54	1,977.
	Enter the amount of line 54 you want: Credited to 2019 estimated tax	1.977	Refunded	55	0.
Part V		<u>-,,,,,</u>	V		
56	At any time during the 2018 calendar year, did the organization have an interest in or a signati				Yes No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organizat	tion may h	ave to file		
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of t	the foreign	country		
	here >				X
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or	r transfero	r to, a foreign trust?		X
	If "Yes," see instructions for other forms the organization may have to file				
58	Enter the amount of tax-exempt interest received or accrued during the tax year > \$		115.		
Sign	Under penalties of perjury, I disclare that I have examined this return, including accompanying schedules are correct, and complete application of preparer (other than taxpayer) is based on all information of which pre-	nd statement eparer has an	ts, and to the best of my kn ny knowledge	owledge and	I belief, it is true,
Here	10/11/9 > 000 700	43.37		•	discuss this return with
i ici c	Signature of officer Date Title	MAN			shown below (see
				nstructions)	1.00
	Print/Type preparer's name Preparer's signature	Date	Check	ıf PTIN	
Paid	BDIAN C DOCUED BDIAN C DOCUED	10/04	self- employed		10041077
Prepa	S - LITHMIT NODDIG LID	10/04	/ 19 Firm's EIN ▶		000 <u>41077</u> -1369227
Use C	950 WEST BANNOCK, SUITE 1050		FIIIII S CIIV	04	1303441
	Firm's address ► BOISE, ID 83702		Phone no	(208)	344-2666
 823711 01	•	 - ,	11 115110 110	, = 0 0 1	Form 990-T (2018)
					(-0,0)

Schedule A - Cost of Good	s Sold. Enter	method of inver	itory valuation N/A					
1 Inventory at beginning of year	at beginning of year 1			6 Inventory at end of year 6				
2 Purchases	2		7 Cost of goods sold Su	btract line 6				
3 Cost of labor	3		from line 5. Enter here					
4a Additional section 263A costs			line 2		7			
(attach schedule)	4a		8 Do the rules of section	263A (with respect to	Yes No			
b Other costs (attach schedule)	4b		property produced or a					
5 Total Add lines 1 through 4b	5		the organization?					
Schedule C - Rent Income (see instructions)	(From Real	Property and	d Personal Property	Leased With Real P	roperty)			
1 Description of property								
(1)	•	"						
(2)								
(3)								
(4)								
	2 Rent receiv	ed or accrued		24 > -				
rent for personal property is more than of rent for p			and personal property (if the percenta personal property exceeds 50% or if nt is based on profit or income)	age 3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)				
(1)	-							
(2)								
(3)								
(4)								
Total	0.	Total		0.				
(c) Total income Add totals of columns here and on page 1, Part I, line 6, column	n (A)	.		(b) Total deductions Enter here and on page Part I, line 6, column (B)				
Schedule E - Unrelated Del	bt-Financed	Income (see	instructions)		• "			
			2 Gross income from		connected with or allocable nanced property			
1 Description of debt-fi	nanced property		or allocable to debt- financed property	(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)			
(1)								
(2)								
(3)								
(4)								
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a	adjusted basis illocable to noed property n schedule)	6 Column 4 divided by column 5	7 Gross income reportable (column 2 x column 6)	8 Allocable deductions (column 6 x total of column 3(a) and 3(b))			
(1)			%					
(2)			%					
(3)			%					
(4)			%					
				Enter here and on page 1, Part I, line 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)			
Totals			>		0.			
Total dividends-received deductions in	acluded in columi	n 8	· ,		▶ 0			

Form 990-T (2018) FAMILY FOUNDATION, INC.

Schedule F - Interest, A				1	Controlled O				- (200		<u></u>
1 Name of controlled organizat	tion	2 Emp identific num	cation		elated income instructions)		al of specified nents made	includ	t of column 4 ed in the cont ation's gross	rolling	6 Deductions directly connected with income in column 5
(1)											
(2)											
(3)									_		
(4)											
Nonexempt Controlled Organi	zations										
7 Taxable Income		unrelated incom see instructions		9 Total	of specified pay made	ments	10 Part of colu in the controll gross	mn 9 tha ing orgai s income	nization's		Deductions directly connected the income in column 10
(1)	-				<u></u>						
(2)											
(3)											
(4)											
							Add colur Enter here and line 8,		e 1, Part I,	l	Add columns 6 and 11 r here and on page 1, Part I, line 8, column (B)
Totals									0.	ļ	0
Schedule G - Investme (see inst	ent Inco ructions)	me of a	Section	1 501(c)(7), (9), or	(17) Or	ganizatior	1			
1 Desc	ription of inco	ome			2 Amount of	income	3 Deduction directly connect (attach scheool)	ected	4 Set-	-asides schedule)	5 Total deductions and set-asides (col 3 plus col 4)
(1)							····	·-			
(2)											
(3)											
(4)											
					Fater here and Part I, line 9, co						Enter here and on page Part I, line 0, column (D)
Totals				•		0.					0
Schedule I - Exploited (see instru		t Activity	Incom	e, Other	r Than Ac	lvertisi	ing Income	•			
1 Description of exploited activity	unrelated	Gross d business ne from business	directly with proof un	penses connected oduction related ss income	4. Net incor from unrelated business (or minus colum gain, comput through	d trade or olumn 2 in 3) If a te cols 5	5 Gross inco from activity is not unrela business inco	that ted	attribut	penses table to mn 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)											
(1) (2) (3)			-								
(3)											
(4)		_									
	page	ere and on 1, Part I, , col (A)	page	ere and on 1, Part I, , col (B)							Enter here and on page 1, Part II, line 28
Totals		0.		0.							0
Schedule J - Advertisi											
Partil Income From	Periodi	cals Rep	orted o	n a Con	solidated	l Basis					
1 Name of periodical		2 Gross advertising income	adv	3 Direct ertising costs	or (loss) (c col 3) If a g	tising gain ol 2 minus pain, compu hrough 7			6 Read cos	lership ts	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)											
(1) (2) (3)											
(3)					i						
(4)											
Totals (carry to Part II, line (5))			0.								0

Form **990-T** (2018)

823731 01-09-19

Form 990-T (2018) FAMILY FOUNDATION, INC.

Part II. Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

			1 4			7 -
	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5 Circulation income	6 Readership costs	/ Excess readership costs (column 6 minus column 5, but not more than column 4)
						
	0.	0.		a 5 g g		0
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (8)	guin sasutsusatis enaicesa e tti ppai	records (per the entiring that high completes of the	ng ang i ang ang panggang ang a ng ang ang ang ang ang ang ang ang ang a	Enter here and on page 1, Part II, line 27
▶	0 -	0 -		and the second second	s est a se dinancia a contra esta nacional dina	0
	>	2 Gross advertising income Defenter here and on page 1, Part I,	2 Gross advertising income 3 Direct advertising costs D • O • O • O • Enter here and on page 1, Part I, line 11, col (A) line 11, col (B)	2 Gross advertising advertising costs or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7 D • O • Enter here and on page 1, Part I, line 11, col (A) Inne 11, col (B)	2 Gross advertising all or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7 5 Circulation income D • O • Enter here and on page 1, Part I, line 11, col (A) Enter here and on page 1, Part I, line 11, col (B)	2 Gross advertising costs 3 Direct advertising costs col 3) If a gain, compute cols 5 through 7 4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7 5 Circulation income costs 6 Readership costs Costs 6 Readership costs Finter here and on page 1, Part I, line 11, col (A) Enter here and on page 1, Part I, line 11, col (B)

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1 Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total Enter here and on page 1, Part II, line 14		•	0.

Form 990-T (2018)

FORM 990-T INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 10
DESCRIPTION	NET INCOME OR (LOSS)
CANYON VALUE REALIZATION FUND, LP - ORDINARY BUSINESS	
INCOME (LOSS)	40.
CANYON VALUE REALIZATION FUND, LP - NET RENTAL REAL ESTATE	
INCOME	33.
CANYON VALUE REALIZATION FUND, LP - INTEREST INCOME	2,706.
CANYON VALUE REALIZATION FUND, LP - DIVIDEND INCOME	335.
CANYON VALUE REALIZATION FUND, LP - OTHER PORTFOLIO INCOME	
(LOSS)	594.
CANYON VALUE REALIZATION FUND, LP - OTHER INCOME (LOSS)	-754.
CANYON BALANCED FUND, LP - INTEREST INCOME	640.
CANYON BALANCED FUND, LP - DIVIDEND INCOME	98.
CANYON BALANCED FUND, LP - OTHER PORTFOLIO INCOME (LOSS)	241.
CANYON BALANCED FUND, LP - OTHER INCOME (LOSS)	-209.
TOTAL INCLUDED ON FORM 990-T, PAGE 1, LINE 5	3,724.

SCHEDULE D (Form 1120)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-RIC, 1120-SF, or certain Forms 990-T.

Go to www irs gov/Form1120 for instructions and the latest information

OMB No 1545-0123

Name

Employer identification number

EDWARD F. & VICKIE S. O'GARA

FAMILY FOUNDATION, INC.

88-0362767

SD-418 OL - T O1-1 O-1	INC.				
EPart I Short-Term Capital Gai	ins and Losses (See	instructions)			
See instructions for how to figure the amounts to enter on the lines below	(d) Proceeds	(e) Cost	(g) Adjustments to ga or loss from Form(s) 89	49,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
This form may be easier to complete if you round off cents to whole dollars	(sales price)	(or other basis)	Part I, line 2, column (9)	combine the result with column (g,
Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b					
1b Totals for all transactions reported on					
Form(s) 8949 with Box A checked					
2 Totals for all transactions reported on					
Form(s) 8949 with Box B checked					
3 Totals for all transactions reported on					
Form(s) 8949 with Box C checked				,	486
4 Short-term capital gain from installment sales	from Form 6252, line 26 or 3	7		4	
5 Short-term capital gain or (loss) from like-kind	d exchanges from Form 8824			5	
6 Unused capital loss carryover (attach computa	ation)			6	(
7 Net short-term capital gain or (loss). Combine	e lines 1a through 6 in column	ı h		7	486.
¶Part III Long-Term Capital Gai	ns and Losses (See	nstructions)			
See instructions for how to figure the amounts to enter on the lines below	(d) Proceeds	(e) Cost	(g) Adjustments to ga or loss from Form(s) 89	ain 40	(h) Gain or (loss) Subtract column (e) from column (d) and
This form may be easier to complete if you round off cents to whole dollars	(sales price)	(or other basis)	Part II, line 2, column	49,	combine the result with column (g
roung off cents to whole dollars		(7 & 1, 1110 £, GOIGHITT	(9)	
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b				(9)	
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to				(9)	
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b				9)	
Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b Totals for all transactions reported on				(g)	
 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b 8b Totals for all transactions reported on Form(s) 8949 with Box D checked 				(g)	
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b 8b Totals for all transactions reported on Form(s) 8949 with Box D checked 9 Totals for all transactions reported on				(g)	
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b 8b Totals for all transactions reported on Form(s) 8949 with Box D checked 9 Totals for all transactions reported on Form(s) 8949 with Box E checked				(g)	13,892.
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b 8b Totals for all transactions reported on Form(s) 8949 with Box D checked 9 Totals for all transactions reported on Form(s) 8949 with Box E checked 10 Totals for all transactions reported on				11	13,892.
 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b 8b Totals for all transactions reported on Form(s) 8949 with Box D checked 9 Totals for all transactions reported on Form(s) 8949 with Box E checked 10 Totals for all transactions reported on Form(s) 8949 with Box F checked 	from Form 6252, line 26 or 3				13,892.
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b 8b Totals for all transactions reported on Form(s) 8949 with Box D checked 9 Totals for all transactions reported on Form(s) 8949 with Box E checked 10 Totals for all transactions reported on Form(s) 8949 with Box F checked 11 Enter gain from Form 4797, line 7 or 9				11	13,892.
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b 8b Totals for all transactions reported on Form(s) 8949 with Box D checked 9 Totals for all transactions reported on Form(s) 8949 with Box E checked 10 Totals for all transactions reported on Form(s) 8949 with Box F checked 11 Enter gain from Form 4797, line 7 or 9 12 Long-term capital gain from installment sales				11 12	13,892
 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b 8b Totals for all transactions reported on Form(s) 8949 with Box D checked 9 Totals for all transactions reported on Form(s) 8949 with Box E checked 10 Totals for all transactions reported on Form(s) 8949 with Box F checked 11 Enter gain from Form 4797, line 7 or 9 12 Long-term capital gain from installment sales 13 Long-term capital gain or (loss) from like-king 	d exchanges from Form 8824	7		11 12 13	13,892
 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b 8b Totals for all transactions reported on Form(s) 8949 with Box D checked 9 Totals for all transactions reported on Form(s) 8949 with Box E checked 10 Totals for all transactions reported on Form(s) 8949 with Box F checked 11 Enter gain from Form 4797, line 7 or 9 12 Long-term capital gain from installment sales 13 Long-term capital gain or (loss) from like-kind 14 Capital gain distributions 15 Net long-term capital gain or (loss) Combine 	d exchanges from Form 8824 e lines 8a through 14 in colum	7		11 12 13 14	13,892.
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b 8b Totals for all transactions reported on Form(s) 8949 with Box D checked 9 Totals for all transactions reported on Form(s) 8949 with Box E checked 10 Totals for all transactions reported on Form(s) 8949 with Box F checked 11 Enter gain from Form 4797, line 7 or 9 12 Long-term capital gain from installment sales 13 Long-term capital gain or (loss) from like-king 14 Capital gain distributions 15 Net long-term capital gain or (loss) Combine	d exchanges from Form 8824 Innes 8a through 14 in colum d II	7 In h		11 12 13 14	13,892 38. 13,930
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b 8b Totals for all transactions reported on Form(s) 8949 with Box D checked 9 Totals for all transactions reported on Form(s) 8949 with Box E checked 10 Totals for all transactions reported on Form(s) 8949 with Box F checked 11 Enter gain from Form 4797, line 7 or 9 12 Long-term capital gain from installment sales 13 Long-term capital gain or (loss) from like-kind	d exchanges from Form 8824 e lines 8a through 14 in colum d II ne 7) over net long-term capit	7 In h		11 12 13 14 15	13,892. 38. 13,930. 486. 13,930. 14,416.

JWA

Form **8949**

Department of the Treasury Internal Revenue Service

Sales and Other Dispositions of Capital Assets

► Go to www.irs.gov/Form8949 for instructions and the latest information.
File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D

OMB No 1545-0074

2018

Attachment Sequence No 12A

Name(s) shown on return

EDWARD F. & VICKIE S. O'GARA

FAMILY FOUNDATION, INC.

Social security number or taxpayer identification no.

88-0362767

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check

broker and may even tell you which				****			
Part Short-Term. Transact	ions involving capit	al assets you held	1 year or less are	generally short-term (s	ee instructi	ons) For long-term	
transactions, see page 2 Note. You may aggregate a codes are required. Enter the	Il short-term transa	ctions reported on Schedule D. line 1	Form(s) 1099-B sh	owing basis was repo	rted to the l	RS and for which no Form 8949 (see ins	adjustments or
You must check Box A. B. or C below.	Check only one bo	X. If more than one b	ox applies for your shi	ort-term transactions, com	plete a separ	ate Form 8949, page 1,	
f you have more short-term transactions than w							
(A) Short-term transactions re		•	-		e Note ab	ove)	
(B) Short-term transactions re	ported on Form(s	s) 1099-B showir	ng basis wasn't r	eported to the IRS			
X (C) Short-term transactions no	ot reported to you	u on Form 1099-	В			****	···
1 (a)	(b)	(c)	(d)	(e)		it, if any, to gain or	(h)
Description of property (Example 100 sh XYZ Co)	Date acquired (Mo, day, yr)	Date sold or disposed of	Proceeds (sales price)	Cost or other basis See the	in column	ou enter an amount (g), enter a code in See instructions	Gain or (loss). Subtract column (e)
(Champio 100 dir reco	(,,, ,	(Mo , day, yr)		Note below and see Column (e) in	(f)	(g) Amount of	from column (d) & combine the result
				the instructions	Code(s)	adjustment	with column (g)
CANYON VALUE							
REALIZATION FUND,							
LP	<u> </u>						<923.
CANYON BALANCED	-						
FUND, LP	-			-		_	1,409.
CHD, BI	-		_	 -			2/2050
			_	-			
				-			<u> </u>
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2 Totals. Add the amounts in colu							
negative amounts) Enter each to	otal here and incl	ude on your			1		
Schedule D, line 1b (if Box A ab	•	,			!		100
above is absolved) or line 2 (if E	ex C above is of	nackad)	I	i	1	I	486.

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

Name(s) shown on return Name and SSN or taxpayer identification no not required if shown on page 1

EDWARD F. & VICKIE S. O'GARA

Social security number or taxpayer identification no.

88-0362767

FAMILY FOUNDATION, INC. Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute

itatement will have the same informa proker and may even tell you which l		99-B Either will	snow whether yo	ur basis (usually yol	ur cost) wa	is reported to the i	HS by your
Part III Long-Term. Transaction		al assets you held	more than 1 year ar	e generally long-term	(see instruc	tions) For short-term	n transactions,
see page 1 Note: You may aggregate al							
codes are required Enter th	e totals directly on	Schedule D, line 8	a, yoù aren't require	ed to report these trai	nsactions or	n Form 8949 (see ins	tructions)
ou must check Box D, E, or F below. (Check only one bo	DX. If more than one be ne or more of the boxe	ox applies for your long s, complete as many fo	g-term transactions, comp orms with the same box c	olete a separa hecked as voi	te Form 8949, page 2, fo u need	r each applicable box
(D) Long-term transactions rep	· -				-		
(E) Long-term transactions rep	•	•	-	,		•	
X (F) Long-term transactions no	t reported to you	on Form 1099-E	3				
(a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds (sales price)	(e) Cost or other basis See the	loss If you	nt, if any, to gain or ou enter an amount (g), enter a code in	(h) Gain or (loss). Subtract column (e)
(Example 100 sh XYZ Co)	(Mo , day, yr)	disposed of (Mo , day, yr)	(,	Note below and see Column (e) in the instructions	(f) Code(s)	(g) Amount of adjustment	from column (d) & combine the result with column (g)
CANYON VALUE						aojustinent	
REALIZATION FUND,				<u> </u>			
LP							11,137.
CANYON BALANCED							
FUND, LP							2,755.
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		-	- 1				
2 Totals. Add the amounts in colui	mns (d), (e), (a), a	and (h) (subtract					
negative amounts) Enter each to						ļ	
Schedule D, line 8b (if Box D abo		-					

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

above is checked), or line 10 (if Box F above is checked)